

# APPLICATION FORM FOR EMPLOYMENT WITH THE U.S. MISSION, CHENNAI, INDIA

<b>NAME IN FULL</b> <i>(Last) (Middle) (First)</i>			<b>JOB TITLE IN ANNOUNCEMENT</b>	
<b>SEX :</b> Male      Female			<b>ANNOUNCEMENT NO.</b>	
<b>PRESENT ADDRESS:</b>			<b>DATE OF BIRTH</b> <i>(Month, Day, Year)</i>	
			<b>PLACE OF BIRTH</b> <i>(City, Country)</i>	
			<b>CITIZENSHIP</b>	
<b>TELEPHONE #:</b>			<b>EMAIL ADDRESS:</b>	
NAMES AND LOCATION OF EDUCATIONAL INSTITUTIONS ATTENDED	DATES		DEGREE	MAJOR SUBJECTS
	From	To		
<b>COMPUTER EXPERIENCE:</b>				
<b>SPECIAL QUALIFICATIONS AND SKILLS:</b> List any special skills you possess and machines and equipment you can use.				
<b>TYPING SKILLS</b>  <div style="text-align: center;">WPM</div>	<b>LICENSES/CERTIFICATION:</b>			

<b>LANGUAGE PROFICIENCY</b>				
<b>Level I: Rudimentary</b>		<b>Level II: Limited Knowledge</b>		<b>Level III: Good Working Knowledge</b>
<b>Level IV: Fluency</b>		<b>Level V: Interpreter</b>		
(Name and Indicate the level of your competence)				
Language	Speak	Understand	Write	Read

### Details of your CURRENT employment

May we approach your present employer?

☐ Yes

☐ No

<b>Dates of Current Employment</b> (mm/dd/yyyy) From:  To: continuing	<b>Title of Position</b>	<b>Duties</b>
	<b>Salary (per year)</b>	
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of immediate supervisor</b>		
<b>Why do you want to leave the current job?</b>		

**Details of your PREVIOUS 5 Positions Of Employment:**

<b>Dates of Employment</b> From: To:	<b>Title of Position</b>  <b>Salary (per year)</b>	<b>Duties</b>
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of immediate supervisor</b>		
<b>Reason for Leaving</b>		

<b>Dates of Employment</b> From: To:	<b>Title of Position</b>  <b>Salary (per year)</b>	<b>Duties</b>
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of immediate supervisor</b>		
<b>Reason for Leaving</b>		

<b>Dates of Employment</b> From: To:	<b>Title of Position</b>	<b>Duties</b>
	<b>Salary (per year)</b>	
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of immediate supervisor</b>		
<b>Reason for Leaving</b>		

<b>Dates of Employment</b> From: To:	<b>Title of Position</b>	<b>Duties</b>
	<b>Salary (per year)</b>	
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of immediate supervisor</b>		
<b>Reason for Leaving</b>		

<b>Dates of Employment</b> From: To:	<b>Title of Position</b>	<b>Duties</b>
	<b>Salary (per year)</b>	
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of immediate supervisor</b>		
<b>Reason for Leaving</b>		

<b>REMARKS</b>
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<b>LIST ANY RELATIVES OR FAMILY MEMBERS EMPLOYED BY THE U.S. MISSION:</b>		
<b>Name</b>	<b>Section</b>	<b>Relationship</b>
<b>CERTIFICATION</b> <b>Before signing this form make sure you have answered all questions fully and completely. A false statement on this form is cause for disqualification/dismissal.</b>		
I do solemnly affirm that the information contained herein is correct to the best of my knowledge and belief.		
SIGNATURE _____		DATE _____